

These minutes are for information only. They have not been reviewed and approved by the Board of Emergency Medical Services. Such review will take place at the next regularity scheduled meeting of the Board on October 19, 2006.

**BOARD OF EMERGENCY MEDICAL SERVICES
JUNE 09, 2006**

The meeting of the Board of Emergency Medical Services was called to order by Bruce Beins, Chairperson, at 9:00 a.m. The meeting was held at the Staybridge Suites, 2701 North Fletcher Ave, Conference Room, Lincoln, NE., 68521. Copies of the agenda had been sent to board members and other interested parties at least ten days prior to the meeting. Roll was taken and the following board members were present:

Ron Balthazor	Shawn Baumgartner
Bruce Beins	Michael Buscher
Joel Cerny	John Doyle
Bob Dunn	Dan Hakel
Ben Lans	Bob Olson
Earl Rudolph	Val Snyder

Members Absent: Dave Engler, Clint Rasmussen, Tom Surber, Michael Westcott.

Credentialing Staff present were:

Diane Hansmeyer, Section Administrator
Patty Pierson, Credentialing Coordinator
Pam Harris, Credentialing Specialist

AGENDA

Olson moved to approve the revised agenda. Lans seconded.

Discussion: Beins stated that he would like to add "Other" under item 20, "Miscellaneous Business".

Voting aye: Balthazor, Baumgartner, Beins, Buscher, Cerny, Doyle, Dunn, Hakel, Lans, Olson, Rudolph, Snyder. Voting nay: none. Absent: Engler, Rasmussen, Surber, Westcott. Motion carried.

APPROVAL OF MINUTES – MARCH 10, 2006

Hakel moved to approve the March 10, 2006, Board of Emergency Medical Services Minutes. Balthazor seconded.

Discussion: none.

Voting aye: Snyder, Rudolph, Olson, Lans, Hakel, Dunn, Doyle, Cerny, Buscher, Beins, Baumgartner, Balthazor. Voting nay: none. Absent: Engler, Rasmussen, Surber, Westcott. Motion carried.

Dr. Joseph Stothert, State Trauma Medical Director, gave the Board a brief report on the activities of the Trauma Board. The Trauma Board has been in existence since 2002. They are to oversee the development of the trauma system for the State of Nebraska. A system for review and

designation of hospitals has been developed. There have been approximately twenty trauma centers approved. There are approximately about another eighty hospitals to be reviewed. The Board is asking hospitals to encourage pre-hospital personnel to accurately document treatment on NARSIS forms. State Trauma Protocols are being developed for trauma centers.

INVESTIGATIONS REPORTS

Olson moved to go into closed session at 9:08 a.m. for the purpose of protecting the reputation of individuals and reviewing investigational reports. The "Open Meeting" law was posted.

Baumgartner seconded.

Discussion: none.

Voting aye: Lans, Hakel, Dunn, Doyle, Cerny, Buscher, Beins, Baumgartner, Balthazor, Olson, Rudolph, Snyder. Voting nay: none. Absent: Engler, Rasmussen, Surber, Westcott. Motion carried.

Mike Buscher left the meeting at 9:15 a.m. Returned to closed session at 9:40 a.m.

John Doyle left the meeting at 9:15 a.m. Returned to closed session at 9:40 a.m.

John Doyle left the meeting at 10:25 a.m. Returned to closed session at 10:31 a.m.

Bruce Beins left the meeting at 11:06 a.m. Returned to closed session at 11:09 a.m.

Returned to open session at 11:10 a.m.

APPLICATIONS FOR LICENSURE

INDIVIDUAL CERTIFICATIONS

Doyle moved to approve David R. Christensen, Ronald E. Keen, Steve A. Overly, and Deon D. Daniels to practice as certified emergency medical technicians. Olson seconded.

Discussion: none.

Voting aye: Balthazor, Baumgartner, Buscher, Cerny, Doyle, Dunn, Hakel, Lans, Olson, Rudolph, Snyder. Voting nay: none. Abstain: Beins. Absent: Engler, Rasmussen, Surber, Westcott. Motion carried.

Baumgartner moved to issue Aaron D. Collingham a probationary certification for six months to practice as a certified emergency medical technician with the following condition: 1. Attend three substance counseling sessions. The reason for this probationary certification is based on the following: 1. A previous "Driving Under the Influence Conviction"; 2. Licensee Assistance Program (LAP) evaluation recommendation. Snyder seconded.

Discussion: none.

Voting aye: Snyder, Rudolph, Olson, Lans, Hakel, Dunn, Doyle, Cerny, Buscher, Beins, Baumgartner, Balthazor. Voting nay: none. Absent: Engler, Rasmussen, Surber, Westcott. Motion carried.

SERVICES

Olson moved to approve Kearney Raceway Park EMS as a Basic Life Support Non-Transport Service. Snyder seconded.

Discussion: Bruce Beins did the site visit. This is the drag stripe in Kearney, NE. Good Samaritan EMS did their stand-bys, however, due to the increase in cost they have decided to apply for their

own license service. They have a signed agreement with Good Samaritan to do their patient transports. They meet the current rules and regulations.

Voting aye: Olson, Rudolph, Snyder, Balthazor, Baumgartner, Beins, Buscher, Cerny, Doyle, Dunn, Hakel, Lans. Voting nay: none. Absent: Engler, Rasmussen, Surber, Westcott. Motion carried.

Lans moved to approve Keystone-Lemoyne Fire & Rescue as a Basic Life Support Transport Service pending the submission of Infectious Disease Control Procedures signed by their physician medical director and a copy of a CPR card that was missing for an individual. Rudolph seconded.

Discussion: Shawn Baumgartner did the site visit. They had Infectious Disease Control Procedures in place; however, they were not signed by their physician medical director. Baumgartner stated that they were missing one of their personnel's CPR card in their files. They meet all the other requirements of the current rules and regulations.

Voting aye: Lans, Hakel, Dunn, Doyle, Cerny, Buscher, Beins, Baumgartner, Balthazor, Snyder, Rudolph, Olson. Voting nay: none. Absent: Engler, Rasmussen, Surber, Westcott.

Doyle moved to approve American Red Cross as a Basic Life Support Non-Transport Service pending submission of their Hazardous Material Protocols signed by their physician medical director, signed patient transport agreement from the City of Lincoln, and a copy of their corrected protocols signed by their physician medical director. Buscher seconded.

Discussion: Bob Olson did the site visit. Olson stated that the City of Lincoln had not yet signed their patient transport agreement. At this time, they will only be staffing events in the City of Lincoln. If they staff an event in Lancaster County, they will place in their files a signed agreement with the local ambulance service for that event. They will be using the State's Model Protocols with a small correction. They did not have a Hazardous Material Protocols in place.

A board member stated that on the roster there are a lot of first aid personnel listed, once they become a licensed ambulance service, when they are dispatched for a medical emergency do they have to make sure that there is always a licensed health care provider as part of the group that responds to the call. Hansmeyer stated that the American Red Cross is also a training agency and they have been doing some first responder training, however, those individuals are not certified. Their plan is to get those individuals certified. They also have nurses, physicians, paramedics, and emergency medical technicians that would also be responding to those kinds of calls. The current rules and regulations state that at least one out-of-hospital emergency care provider be in the back of an ambulance for patient transport. The current rules and regulations are not specific about arriving at the scene of a medical emergency. It was felt that certified out-of-hospital emergency care providers would be present for all medical emergencies.

Voting aye: Balthazor, Baumgartner, Beins, Buscher, Cerny, Doyle, Dunn, Hakel, Lans, Olson, Rudolph, Snyder. Voting nay: none. Absent: Engler, Rasmussen, Surber, Westcott. Motion carried.

EMS UPDATE

Gary Steele, Training Coordinator, stated that EMS Programs will be discontinuing the "Reading Inventory". The reason for discontinuing the "Reading Inventory" is that there were only forty-nine individuals that used it. The cost for maintaining the "Reading Inventory" is approximate \$3,000.00. It was felt that there was not enough use to warrant the cost of maintaining the "Reading Inventory".

Steele stated that the second leadership training course is finishing. There are twenty-one individuals that took this course.

EMS Programs are in the process of organizing an instruction improvement committee. The committee will have five members. The committee will meet on July 28, 2006. They will look at

developing a pilot program for an instruction improvement program. The committee will consist of two individuals who hold advanced degrees in administration and three who are EMS educators.

Little Priest Training Agency sent a letter to the Department stating that they are closing their training agency. Little Priest has an agreement with Northeast Community College to do training. Little Priest will be sending two of their individuals to the EMS Instructor Course. Northeast Community College will utilize those two individuals to train individuals from the Little Priest area.

Nebraska Methodist College EMS Division will be sending to the Department a letter stating that they will be closing their training agency.

Gary Steele has finished inspecting the Western Nebraska Community College and the Regional West Medical Center training agencies. Steele stated that both training agencies had all their documentation and were well organized.

Gary Steele, Training Coordinator, stated that there may be a need for a curriculum that deals with capnography due to the advanced airway course. Steele stated that there is going to be a revision in the EMS curriculum in the next few years and suggested to wait until the new EMS curriculum is developed.

The EMT-Intermediate curriculum involving four medications has been completed. It will be sent to the training agencies for their review in the next few days.

Steele wanted to make the Board aware of the issue that some instructors are teaching outside the curriculum. He further stated that there are some training agencies that do not have a procedure for monitoring what their instructors are teaching in class. Some of the students are feeling that if they are taught a skill they should be able to practice that skill. It was suggested that the Board review the current rules and regulations to see if the quality assurance program required of training agencies could include this requirement. Bruce Beins, Chairperson, assigned the Training Agencies and Service Programs Committee to review this issue and bring a recommendation back to the Board.

Bruce Beins, Chairperson, stated that he had received an email from Tami Meyers, Southeast Community College asking for documentation to support a degreed paramedic program. Tami will be addressing Southeast Community College requesting the development of a paramedic degree program. Beins asked the Board to forward any support documentation for a paramedic degree program to Tami.

Steele was asked if Dean Cole, EMS Program Administrator, was going to provide more detailed information regarding the ENARSIS documentation and what the percentage of internet accessibility is for ENARSIS. Shawn Baumgartner stated that the data sets for ENARSIS are designed around the National Data Sets.

The Board recessed at 11: 45 a.m. The meeting reconvened at 12:10 p.m.

THREE YEAR FIELD EXPERIENCE REQUIREMENT FOR EMS INSTRUCTORS

Baumgartner moved that ride along time with ambulance services for initial training would not be included in the three-year field experience requirement for EMS Instructors. Rudolph seconded.

Discussion: Diane Hansmeyer stated that she had received an email asking if the Board would consider ride along time with ambulance services during the initial training as part of the three year field experience requirement for an EMS Instructor. The Board stated that ride along time with ambulance services is training with supervision and field experience is actually applying those learned skills without supervision.

Voting aye: Snyder, Rudolph, Olson, Lans, Hakel, Dunn, Doyle, Cerny, Buscher, Beins, Baumgartner, Balthazor. Voting nay: none. Absent: Engler, Rasmussen, Surber, Westcott. Motion carried.

CONCEALED WEAPON LAW LB454 & ITS IMPACT ON EMS

Shawn Baumgartner stated that he wanted to make the Board aware of the impact that LB454, Concealed Weapon Law, will have on EMS. The bill states that a permit holder must display a permit to carry a concealed weapon and their identification such as their Nebraska motor vehicle operator's license, etc to peace officers or emergency medical services personnel that the permit holder is carrying a concealed handgun. Peace officers or emergency medical services personnel may secure the handgun or direct that it be secured during the duration of the contact if it is determined that it is necessary for the safety of any person present.

When the emergency medical services personnel has determined that the permit holder is not a threat to the safety of any person present and if the permit holder is physically and mentally capable of possessing the handgun, the emergency medical services personnel shall return the handgun to the permit holder before releasing the permit holder from the scene and breaking contact. If the permit holder is transported for treatment to another location, the hand gun shall be turned over to any peace officer. The peace officer shall provide a receipt which includes the make, model, caliber and serial number of the hand gun. If the permit holder refuses to follow peace officer's and emergency medical services personnel directions, it will be a Class I Misdemeanor Violation.

Bruce Beins, Chairperson, stated that the rules and regulations are TITLE 272 Chapter 21. He will email these to the Board for their review.

EMS SERVICE SELF-INSPECTIONS

Diane Hansmeyer stated that EMS services are randomly inspected during renewal. The Department does not have the resources to perform more inspections. Hansmeyer stated that she sent each board member a copy of a "Pharmacy Self-Inspection". (Attachment A) Hansmeyer explained that the Pharmacy Board developed a self-inspection form that a pharmacist can use to evaluate its individual pharmacy to see if it is in compliance with the rules and regulations. The Board could develop a self-inspection form for ambulance services. A self-inspection form could be a useful tool for ambulance services to use in preparations for audits, etc. It was suggested to send a copy of this form to the Nebraska Ambulance Services Association for their opinion. There are eighteen services who are members of the Nebraska Ambulance Services Association at this time. Bruce Beins, Chairperson, assigned the Training Agencies and Service Programs Committee to review and report back to the Board with a recommendation.

EMT-INTERMEDIATE PRACTICE AND PROCEDURES

ADMINISTER MEDICATIONS VIA ET TUBE

Doyle moved it is the Board's opinion that intermediates administer medications through ET Tubes and in TITLE 172 NAC 11, Section 11-006.03, item 13, add the wording "endotracheal". Buscher seconded.

Discussion: Carol Gupton of Omaha Fire Department stated that she has been revising some of Midland's Protocols for the Omaha area. It was noticed in the current rules and regulations under the intermediate's practice and procedures that they do not specifically state the administration of medications through the ET Tube. Gupton felt the intent is for intermediates to administer medications through the ET Tube and would like a clarification from the Board. Further discussion determined that intermediates should administer medication through the ET Tubes and this should be stated in the rules and regulations under the intermediate's practice and procedures section. Bruce Beins, Chairperson, stated that the medications will also need to be placed in the model protocols.

Voting aye: Lans, Hakel, Dunn, Doyle, Cerny, Buscher, Beins, Baumgartner, Balthazor, Snyder, Rudolph, Olson. Voting nay: none. Absent: Engler, Rasmussen, Surber, Westcott. Motion carried.

MAINTAIN ACLS CERTIFICATION

Baumgartner moved to amend in Chapter 11, Section 11-006.03, item 20, to add that the intermediate must hold a current Advanced Cardiac Life Support (ACLS) certificate before he or she can perform synchronized cardioversion and establish/maintain infusion of Lidocaine".

Buscher seconded.

Discussion: Carol Gupton of Omaha Fire Department stated that in the current rules and regulations under intermediate's practice and procedures require the approval of the physician medical director and the completion of a nationally recognized course in Advanced Cardiac Life Support (ACLS) to perform synchronized cardioversion and establish/maintain infusion of Lidocaine. Her question to the Board is "Do intermediates have to stay current at the Advanced Cardiac Life Support (ACLS) level"? The Board stated its intent is for them to have a current ACLS certification.

Voting aye: Balthazor, Baumgartner, Beins, Buscher, Cerny, Doyle, Dunn, Hakel, Lans, Olson, Rudolph, Snyder. Voting nay: none. Absent: Engler, Rasmussen, Surber, Westcott. Motion carried.

Baumgartner moved it is the Board's opinion that intermediates are to hold a current certification in Advanced Cardiac Life Support to perform synchronized cardioversion and establish/maintain infusion of Lidocaine. Olson seconded.

Discussion: none.

Voting aye: Olson, Rudolph, Snyder, Balthazor, Baumgartner, Beins, Buscher, Cerny, Doyle, Dunn, Hakel, Lans. Voting nay: none. Absent: Engler, Rasmussen, Surber, Westcott. Motion carried.

NURSE'S SCOPE OF PRACTICE COMMITTEE

John Doyle, Chairperson of Nurse's Scope of Practice Committee, stated that he inherited a list from Dr Westcott. The list that was previously developed listed emergency skills for a nurse and physician medical director to review to see if a nurse is trained in that certain skill. Doyle stated in further reviewing he felt that LPNs are very limited in their skills. There are two types of LPNs. An LPN-C could start IVs, administer IV fluids, and administer certain kinds of medications. Doyle presented for the Board's review copies of the Licensed Practical Nurse-Certified Act for LPN-C,

LNP/LPN-C Activities Comparison Chart, and Description of LPN-C Practice. (Attachments B, C, and D)

Doyle had contacted the Clinical Education Specialist at the University of Nebraska Hospital. He stated that two columns were added for RNs and LPNs to the Nebraska EMS Out-Of-Hospital Provider Comparison Chart (Attachment E) and asked the Clinical Education Specialist of the University of Nebraska Hospital to mark the skills that the RNs and LPNs would be able to perform. This chart shows that there are some skills the nurses would need training. Doyle stated that he was going to ask for an opinion from the Board of Nursing.

It was explained that this task force committee was developed because of nurses waiting to become members of ambulance services and the need for a list to be utilized as a tool by physician medical directors of ambulance services to determine the skills of the nurse. The Statutes Relating to Emergency Medical Services Act allows RNs/LPNs to practice in the place of an out-of-hospital emergency care provider to provide service within their scope of practice.

Bruce Beins, Chairperson, asked if there is any further discussion and decided to leave this on the agenda for the next board meeting.

PROPOSED RULES AND REGULATIONS

ALBUTEROL / DUONEB

Diane Hansmeyer stated at the last meeting that she would review the statutes and rule and regulations that deal with school personnel for administering albuterol. Hansmeyer stated that the language was not specific. The language used was “respiratory medications”. The Board may want to consider this language instead of making the language so specific. The concern would be that it is knowledge based and knowing the different kinds of medicines. It was felt that it would increase training for the out-of-hospital emergency medical provider at the basic level. The reason for the addition of albuterol was to assist the basic ambulance services when called to a school where albuterol was being administered by the school and to continue this administration during transport of the patient. Bruce Beins, Chairperson, stated that the Board will table this issue at this time and see what the statutes and rule and regulations that deals with school personnel administering respiratory medications state in the future.

OUT-OF-HOSPITAL PERSONNEL COMMITTEE

Bruce Beins, Chairperson of the Out-of-Hospital Personnel Committee, stated that at the last board meeting the Board made a motion to form an EMS Task Force and to address several different issues. Beins has spoken briefly with Jerry Stillmock, Lobbyist for Nebraska State Volunteer Firefighters Association and Richard Lombardi, Lobbyist for Nebraska Emergency Medical Services Association regarding the EMS Task Force. It was suggested to keep the EMS Task Force relatively small so that the issues can be accomplished more easily. Stillmock and Lombardi are going to review what outside groups should compose the EMS Task Force. Earl Rudolph, Joel Cerny and Shawn Baumgartner agreed to work on the EMS Task Force. The EMS Task Force will need to move forward in the near future to be ready for any new legislation.

TRAINING AGENCIES AND SERVICE PROGRAMS COMMITTEE

SERVICE'S BACK UP RESPONSE PLAN

Earl Rudolph, Chairperson of Training Agencies and Service Programs Committee, stated he has reviewed the current rules and regulations and the requirement that a service must have a back up response plan. He stated that he would like the Board to review this a little more and get back to the committee with any recommendations. Rudolph asked the question does the dispatch know what an ambulance service back up plan is. He felt that all the Board could do is make a suggestion that each ambulance service display a copy of their back up plan with dispatch. He then asked the Board to ask ambulance services in their area to see if there is a real problem and for any recommendations they may have to address the issue. It was suggested that maybe a timeline could be placed with the requirement for a service to have a back up response plan. It was also suggested that a maximum time be allowed before mutual aid is required. There is not a standard for mutual aid. Diane Hansmeyer explained that the Board can only impact services and the intent of the statutes is to allow local control so a specific timeline may not work the same for all ambulance services. She explained that the Board could require certain things in a service's back up plan and then the services would have to communicate with their dispatch on their back up response plan.

FREQUENCY OF TRAINING COURSES BY TRAINING AGENCIES

Earl Rudolph, Chairperson of Training Agencies and Service Programs Committee, stated that this was discussed several years ago. It was determined at that time that due to the availability of candidates for EMT Courses, etc that they would have to teach at least one course instead of a certain amount of EMT Courses per year. Gary Steele, Training Coordinator, stated that he feels that it impacts the quality of teaching for a training agency if they are not teaching at least one course per year. The reason this has come up is because a training agency was going to become an advance training agency and only teach an advance course once every few years. The question was asked if this training agency would have quality teaching. It was suggested that the EMS instructor used for this training agency may have been teaching with another training agency so the quality of teaching would be the same as if the training agency had taught a course per year. It was suggested that maybe something could be listed in the training agency's quality assurance program.

REVIEW SERVICES AUDIT REQUIREMENT FOR CERTIFICATION OF AIR MEDICAL TRANSPORT (CAMT)

Baumgartner asked if an ambulance service had received the "Certification of Air Medical Transport" (CAMT) and it was audited could they use this certification as passing their audit inspection since this certification has much more stringent inspection requirements. Earl Rudolph, Chairperson of Training Agencies and Service Programs Committee, stated that he would have to check to see what was required to obtain the "Certification of Air Medical Transport" CAMT accreditation and bring that information back to the Board.

NON-STATE REGULATORY COMMITTEE

Shawn Baumgartner stated that the National EMS Scope of Practice Guidelines have been finalized. The National EMS Scope of Practice will have a huge impact on EMS in Nebraska. It will now start to drive the curriculum. It will become guidelines instead of curriculum. This will have an impact on statutes and rules and regulations.

The HIPPA guidelines have lightened up on fines for violations. They are now looking at the intention of the violation and if steps are being taken to fix the violation. However, if there is someone who is intentionally violating the HIPPA regulations then a huge fine would be accessed.

Medicare will have a two-week delay of payments during the end of their fiscal year in October.

407 REVIEW / LEGISLATIVE COMMITTEE

Bruce Beins, Chairperson of 407 Review/Legislative Committee, stated that he was asked to be on the Technical Review Committee for mid-wives. The 407 Review Process is done when there is a change in scope of practice or to credential a new profession. The Technical Review Committee reviews all the information and holds public hearings then puts together a recommendation based on specific criteria. It then goes to the Board of Health. The Board of Health will give their recommendation. After the Board of Health's recommendation, it goes to the Department for their recommendation. The legislature will look at the recommendations from the Department and the Board before legislation is passed. Beins stated that he felt this will have an impact of EMS because of mid-wives delivering babies at a person's home.

Beins stated that there is not much going on with the legislature at this time. The primary elections are over. Beins reminded everyone that since there are so many new senators that will be coming to the legislature this would be an opportunity to keep the new senators informed on EMS issues.

The legislation passed for students in school to self-administer asthma and diabetes medications.

PROTOCOLS / NARSIS COMMITTEE

John Doyle, Chairperson of Protocols / NARSIS Committee, stated that there will be final copy of the new protocols at the next board meeting for the Board's review. Bruce Beins stated that when the draft copy of protocols has been sent to all board members, it should also be sent to some of the out-hospital-emergency care providers across the State for comments before the Board votes on a final copy at the next board meeting. Doyle stated that can be done.

REAFFIRMATION OF MAIL BALLOTS

Olson moved to reaffirm the mail ballots for Antonio Balandran Jr, Brandee M. Jones, and Jesse L. Nielsen to practice as certified emergency medical technician-paramedics; Heath Cram, Joshua Clark, William E. Goeking, Phil Larson, Shawn H. Soderquist, Ryan Twohig, Carl W. Warford, Matthew Hessler, Benjamin A. Kannedy, Melissa Rodriguez, and Rene Trombino to practice as certified emergency medical technicians; Chad D. Schinstock to practice as a certified first responder. Buscher seconded.

Discussion: none.

Voting aye: Balthazor, Buscher, Cerny, Doyle, Dunn, Hakel, Lans, Olson, Rudolph, Snyder.

Voting nay: none. Abstain: Baumgartner, Beins. Absent: Engler, Rasmussen, Surber, Westcott.

Motion carried.

MISCELLANEOUS BUSINESS

TRAUMA BOARD LIAISON REPORT

Shawn Baumgartner, Trauma Board Liaison, reported that the Trauma Board did receive a copy of the draft model protocols. Baumgartner stated that he received a comment from Dr Harry of Good Samaritan Hospital in Kearney, Nebraska. Dr Harry had concerns with the galscow scale. Dr Harry was also going to review the burn section with some of the hospital staff.

The Trauma Board will be looking at the required data set elements. The Trauma Board is very data driven. They may be coming to the Board to request more required data set elements. Bruce Beins, Chairperson, assigned the Protocols/NARSIS Committee to review the current required data set elements and the National Data Sets.

BETA TESTING NATIONAL REGISTRY

Diane Hansmeyer stated that Nebraska was selected for beta testing of the new computer based National Registry Paramedic Written Examination. There have been a total of eighteen candidates that have signed up for the National Registry Paramedic Written Examination. The candidates register on National Registry's web site. The training agency approves the candidate's training on National Registry's web site. Once the training has been approved, the candidate will receive an authority to test letter from National Registry. Once the candidate has received their letter, they will contact Pearson Vue to set up a date and time to take the written examination. The turn around time to receive results for the candidate's paramedic written examination at this time will be four to six weeks. In the future, the turn around time to receive results will be within a twenty-four hour time frame on National Registry's web site. The Beta testing is happening between June 5th through July 25th.

Carol Gupton, of Omaha Fire Department, stated that she had a concern about candidates not able to get their National Registry Paramedic Written Examination results until they had passed their practical skills. Diane Hansmeyer stated she thought that this was during beta testing only. Hansmeyer stated that she will discuss this concern with National Registry during their next telephone conference.

OTHER

Bruce Beins, Chairperson, stated that the Board had received a letter from the Great Plains Regional Medical Center with concerns regarding more training for the driving of ambulance units. The current rules and regulations require that ambulance services provide emergency vehicle driving for operators of motor vehicles or aircraft safety for operators of aircraft every three years. Shawn Baumgartner stated that there may also be a need for educating hospitals to come to some understanding on what is considered a non-emergency or emergency transfer, which would take some of the pressure off an ambulance service when coming to transport a patient. It was felt there is a bigger issue than the need for more education of drivers. Gary Steele, Training Coordinator, stated that EMS Programs is working with the Nebraska State Patrol on providing instructors to teach the Emergency Vehicle Driving Course. He stated that there are a number of classes starting in the fall. Bruce Beins stated that he will write a letter to Great Plains Regional Medical Center explaining what the current requirements are, thanking them for their concern, and to let them know that the Board will review this issue in the future.

Diane Hansmeyer stated that the Department has received several calls from the services regarding individuals that are not licensed and what those individuals could do to assist out-of-hospital emergency care providers. Hansmeyer stated that she drafted an example of some guidelines that could assist certified out-of-hospital emergency care providers when at the scene of an emergency call. She presented these guidelines to the Board. (Attachment F) Hansmeyer stated that she had EMS Programs review these guidelines. She asked for the Board's opinion. The guidelines can be placed on the Department's web site. It was suggested to place a disclaimer that states these guidelines are not considered practicing prior to becoming certified because of the question on the initial application that asks if an individual practiced prior to certification. Hansmeyer explained that this is what a person who is not certified can do to assist and would not be considered practicing. The guidelines will be placed on the agenda for the Board's approval. The Board will review the guidelines before their next meeting and send Diane Hansmeyer any changes.

There being no further business, Bruce Beins, Chairperson, adjourned the meeting at 2:20 p.m.

Earl Rudolph, Secretary

